

United States District Court
NORTHERN DISTRICT OF CALIFORNIA

E-filing

JIAN MING ZHONG, individually, CHEN ZHONG individually

SUMMONS IN A CIVIL CASE

CASE NUMBER:

V.

CV 08

2871

WHA

UNITED STATES DEPARTMENT OF STATE; CONDOLEEZZA RICE, in her Official Capacity, Secretary of State of the United States; MAURA HARTY, in her Official Capacity, Assistant Secretary for Consular Affairs, Department of State; ROBERT GOLDBERG, in his Official Capacity, Consul General, U.S. Consulate in Guangzhou; MICHAEL JACOBSEN, in his Official Capacity, Consular Section Chief, U.S. Consulate in Guangzhou; EMILIO T. GONZALEZ, Director of the United States Immigration and Naturalization Service,

TO: (Name and address of defendant)

United States Attorney's Office, Civil Processing Clerk
P.O. Box 36055
San Francisco, CA 94102

and the Above Named Defendants

YOU ARE HEREBY SUMMONED and required to serve upon PLAINTIFF'S ATTORNEY (name and address)

Law Office Daniel Huang
506 N. Garfield Ave., Ste. 100
Alhambra, CA 91801

an answer to the complaint which is herewith served upon you, within 60 days after service of this summons upon you, exclusive of the day of service. If you fail to do so, judgement by default will be taken against you for the relief demanded in the complaint. You must also file your answer with the Clerk of this Court within a reasonable period of time after service.

Richard W. Wieking

CLERK

EMILIO T. GONZALEZ

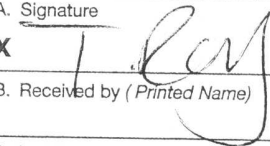
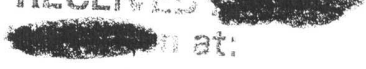
(BY) DEPUTY CLERK

JUN 9 2008

DATE _____

AO 440 (Rev. 8/01) Summons in a Civil Action

| RETURN OF SERVICE | | |
|--|----------|------------------|
| Service of the Summons and Complaint was made by me ¹ | DATE | 7.7.2008 |
| Name of SERVER <u>Tray Li</u> | TITLE | <u>Assistant</u> |
| <i>Check one box below to indicate appropriate method of service</i> | | |
| <div style="margin-bottom: 10px;"> <input type="checkbox"/> Served Personally upon the Defendant. Place where served: </div> <div style="margin-bottom: 10px;"> <input type="checkbox"/> Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein. Name of person with whom the summons and complaint were left: </div> <div style="margin-bottom: 10px;"> <input type="checkbox"/> Returned unexecuted: </div> <div> <input checked="" type="checkbox"/> Other (specify): <u>I served Condoleezza Rice via certified first class mail on June 19. 2008</u> </div> | | |
| STATEMENT OF SERVICE FEES | | |
| TRAVEL | SERVICES | TOTAL |
| | | |
| DECLARATION OF SERVER | | |
| <p>I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 40%;"> <p>Executed on <u>7.7.2008</u></p> <p style="text-align: center; font-size: small;">Date</p> </div> <div style="width: 60%;"> <p style="text-align: center;"><u>Tray Li</u></p> <p style="text-align: center; font-size: small;">Signature of Server</p> <p style="text-align: center;"><u>P.O. Box 1351 Alhambra CA 91802</u></p> <p style="text-align: center; font-size: small;">Address of Server</p> </div> </div> | | |
| <p>(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure</p> | | |

| SENDER: COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
|--|--|---|--|
| <p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> | | <p>A. Signature <input checked="" type="checkbox"/>  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> | |
| <p>1. Article Addressed to:</p> <p>CONDOLEEZZA RICE, in her Official Capacity, Secretary of State of the United States; 2201 C street NW. Washington D.C. 20520</p> | | <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> | |
| <p>2. Article Number (Transfer from service label)</p> | | <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>RECEIVED  at: _____</p> | |
| <p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> | | <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p> | |
| <p>PS Form 3811, February 2004</p> | | <p>Domestic Return Receipt</p> | |
| | | <p>7007 3020 0002 6991 1311</p> | |
| | | <p>102595-02-M-1540</p> | |

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

Law Office of Daniel Huang
P.O. Box 1351
Alhambra, CA 91802-1351

Zhong Jianling

